

DIABETES SAVED TO BREED MORE

By SCIENCE SERVICE

NEW YORK Sept. 4 — Insulin, boon to the diabetic, may be good medicine but it is bad eugenics. Because with its aid, diabetics are saved to breed more diabetics. And many of the children of diabetic mothers are born deformed in one way or another.

This eugenic challenge to diabetes specialists comes from Dr. Alan F. Guttmacher, director of obstetrics and gynecology at Mount Sinai Hospital here.

Modern medicine, he declares, is doing all within its power to thwart nature who, through still births, abortions and malformations, "seems to be crying: Don't let the diabetic woman reproduce herself."

He charges himself with being "among the most guilty" in this thwarting of "nature's intelligent genetic viewpoint."

Even with insulin and modern medical care, the diabetic woman when she becomes pregnant has less than a 65% chance of bearing a surviving child, compared to the non-diabetic who has about an 86% chance. Malformations are about three times as frequent for the offspring of the diabetic woman as for normal women, Dr. Guttmacher reports in *Eugenics Quarterly*, official publication of the American Eugenics Society.

Before 1922, when insulin was discovered, patients with diabetes rarely became pregnant and when they did neither mother nor child survived in half the cases. Since then diabetic parents have multiplied many fold and potential diabetic offspring to even a greater number.

The modern doctor asked to advise a diabetic about having children is faced with the difficult decision between the rights and happiness of the individual and the ultimate welfare of the community. Dr. Guttmacher declares.

Diabetic women have the "same insatiable urge for motherhood as the normal woman" and being unable to have children or being advised against it leaves her with the same sense of frustration as any other woman.

Her plight is made worse by the attitude of adoption agencies which prefer to place children in the homes of physically normal persons who have a full life expectancy.

Dr. Guttmacher says that as an obstetrician he can state the problem but must leave its solution to the geneticist.